

ANTELOPE COUNTY ASSESSOR'S BUILDING PERMIT

This statement is required, pursuant to State Statute 77-13180.01, for improvements and alterations to improvements to real estate.

Date _____
Owner of Property _____
Person Requesting _____ Telephone number _____
Parcel # _____ Legal Descript. Of Property _____
Physical Address of Property _____
Start Date _____ Expected Completion Date _____
Structures removed for construction (before/after) _____

RESIDENTIAL IMPROVEMENTS

HOUSES

Conventional _____ Modular _____ Mobile Home _____ Addition to home _____ Remodeling _____
Additions & Remodeling (type & description) _____
of bathrooms _____ # of Stories _____
Dimensions: W _____ L _____ H _____ Siding type _____
Roofing _____ HVAC _____ Basement Dimensions: W _____ L _____ H _____
Basement Area Finished _____ Basement Area Unfinished _____

GARAGES

Type: Attached _____ Detached _____ Carport _____ Size: W _____ L _____ H _____
Interior Finish _____ Floor Type _____

MISCELLANEOUS

Improvement type/description _____
Dimensions: W _____ L _____ H _____ Floor Type _____

RURAL / COMMERCIAL IMPROVEMENTS

GRAIN BINS

Type: Storage _____ Aeration _____ Drying _____ Hi-Moisture _____ Brand Name _____
Diameter _____ Height _____ Augers: Horizontal _____ Vertical _____
Stirator _____ Perf. Floor _____ Other Equipment _____

ELEVATOR LEG

Bushels/Hour _____ Height _____

CONFINEMENTS

Type: Gestation_____ Nursery_____ Farrow_____ Mod Op Finish_____ Cl Finish_____ Dairy_____

Brand Name_____ Dimensions: W_____ L_____ H_____

Frame Type: Wood_____ Metal_____ Wall Type: Wood_____ Metal_____ Block_____ Poured Cement_____

Floor Type: Concrete_____ Slot Pit_____ Other_____

IMPLEMENT BUILDINGS / CLOSED SHEDS

Brand Name:_____ Type: STR Wall_____ Slant Wall_____ Quonset_____

Dimensions: W_____ L_____ H_____ Frame: Wood_____ Metal_____

Floor: Concrete_____ Other_____ Wall: Wood_____ Metal_____ Block_____ Concrete_____

of Overhead Doors_____

MISCELLANEOUS IMPROVEMENTS

Type / Descriptions_____

Size: W_____ L_____ H_____ Floor Type_____ # Of Bathrooms_____

Heating/Cooling Yes_____ No_____ (If yes) type_____

Frame type_____ Wall Cover_____

Any Additional Information_____

SKETCH AREA

Please Provide a Detailed Drawing – Including Location on Property

I hereby certify that the above information is true and correct to the best of my knowledge. By signing this, I give permission to the Antelope County Assessor and/or staff to inspect this property for assessment purposes.

Signature_____ Date_____

Revised 01/2012- km

*****Failure to sign this form voids this permit